

**W**henever efficient, non-narcotic, relief from pain is needed...



An effective analgesic for the relief of simple headache. Also, provides relief from pain associated with neuralgias, dysmenorrhea, upper respiratory distress, and post-surgical conditions...

### SUPAC-B®...

...is an effective analgesic compound that provides the *non-narcotic* action of n-acetyl-p-aminophenol, the effectiveness of aspirin, the mild stimulation of caffeine and the dual buffering action of calcium gluconate and aluminum hydroxide to minimize gastric irritation.

Relief of pain is usually accomplished within 30 minutes without danger of narcotic addiction.

SUPPLIED: Bottles of 36 and 100.

#### EACH TABLET CONTAINS:

N-Acetyl-p-Aminophenol . . . . .	160 mg
Aspirin . . . . .	230 mg
Caffeine . . . . .	33 mg
Aluminum Hydroxide (dried gel) . . . . .	33 mg
Calcium Gluconate . . . . .	60 mg

#### DOSAGE:

Adults: one or two tablets. May be repeated in 3 or 4 hours. Do not exceed 4 tablets at a single dose or 16 tablets in a 24 hour period.

Children: 6 to 12 years of age, 1/2 the adult dose. 3 to 6 years of age, 1/5 the adult dose.

#### WARNING:

Do not give to children under 3 years of age or use for more than 10 days, unless directed by a physician.

COMPLETE LITERATURE AND SAMPLES ON REQUEST.



**Mission**  
Pharmaceutical Co.  
SAN ANTONIO 6, TEXAS

## REFERENCES AND REVIEWS

(Continued from Page 24)

ABDOMINAL EXPLORATION AT THE TIME OF PELVIC SURGERY—D. E. Woodard and R. E. Dean. GP—Vol. 24:83 (Oct.) 1961.

The authors performed abdominal exploration before pelvic surgical intervention in 127 patients who underwent elective and emergency gynecologic and obstetric pelvic operations, including cesarean sections and operations for cancer. Extrapelvic abnormalities were found in 38 (30 per cent) of the 127 patients. The abdominal exploration did not complicate the postoperative course of the patients. The abdomen should be explored as thoroughly and systematically as possible and should always be explored before the procedure itself begins. Occasionally, the abdominal findings will discourage an elective pelvic procedure or perhaps alter the procedure in some way. Complete abdominal exploration is contraindicated in the poor-risk patient, and it should not be performed in patients with pelvic infections such as acute salpingitis and a tubo-ovarian abscess. Adhesions should not be removed simply for exploratory purposes. Pregnancy is not a contraindication to the abdominal exploration.

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SURGICAL RESECTION OF A TUBERCULOUS ANEURYSM OF THE ASCENDING AORTA—J. L. Kline and J. Durant. New Engl. J. Med.—Vol. 265:1185 (Dec. 14) 1961.

A patient with a tuberculous aneurysm of the ascending thoracic aorta is reported and the literature is reviewed. In addition to the extremely rare occurrence of this lesion, the authors believe that this is the first instance of a tuberculous aneurysm of the ascending aorta surgically treated with a successful outcome.

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IODIDE RETENTION IN CARDIAC DISEASE—G. L. Searle, W. A. Reilly, and K. G. Scott. Metabolism—Vol. 10:848 (Nov., part 1) 1961.

Twelve compensated and 12 decompensated cardiac patients and a control group of 49 euthyroid hospital patients received 100  $\mu$ c of  $I^{131}$  orally. Iodide retention in plasma was significantly greater in the cardiac patients than in the control group; however, neither  $I^{131}$  thyroid uptake nor conversion of  $I^{131}$  to protein-bound  $I^{131}$  were significantly affected.

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POSTOPERATIVE IRRADIATION OF CORNEAL GRAFTS—D. Ainslie and M. Snelling. Lancet—Vol. 2:954 (Oct. 28) 1961.

Sixteen corneal grafts penetrating into vascularized corneas are considered. The grafted tissue became vascularized during the postoperative period. Surface irradiation, using a strontium-90 applicator, was successful in preventing graft opacification due to vascularization. In 13 cases all vessels disappeared. In three some vessels remained, but grafts remained optically satisfactory. It is suggested that the beta irradiation, in addition to a local destructive action upon blood vessels, may modify the immunological reaction.

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ROENTGEN TELEVISION STUDY OF CARDIAC CALCIFICATIONS—N. P. G. Edling. Circulation—Vol. 24:1407 (Dec.) 1961.

In heart surgery the preoperative knowledge of the presence of calcifications in the ostial rings and valves is important. With the introduction of the image intensifier with television the calcifications are more easily and more conclusively diagnosed than by other roentgenological methods. Also calcifications of the coronary arteries are easily observed. In addition, it is possible to exclude cardiac calcifications of surgical importance.